## PART B - FEE(S) TRANSMITTAL

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	CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanyin papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
		7590 12/23/2004	10	t	have its own cer	tificate of mailing	or transmission.	
	VOLPE AND K. UNITED PLAZA, 30 SOUTH 17TH PHILADELPHIA,	, SUITE 1600 STREET	(O)	14 rove	I hereby certify States Postal Ser addressed to the transmitted to the	that this Fee(s) Tr	Mailing or Tran ansmittal is bein nt postage for find JE FEE address 6-4000, on the	smission  g deposited with the United  rst class mail in an envelope  s above, or being facsimile  date indicated below.
02/	15/2005 LWONDIH2 0000(				Stephen	B. Schott		(Depositor's name)
			Atm	347 2 TANK	Seal	B Colass	)	(Signature)
02 1	FC:2501 FC:1504 FC:8001	700.00 OP 300.00 OP 30.00 OP			Spire	2/10	12005	(Date)
	APPLICATION NO.	FILING DATE		FIRST NAME	D INVENTOR	ATTORNE	Y DOCKET NO.	CONFIRMATION NO.
	10/736,325	12/15/2003	· · · · · · · · · · · · · · · · · · ·	Mario M	[eggiolan	CAM3-PT032.1 3694		3694
	APPLN. TYPE	SMALL ENTITY	ISSUE FI	ĒE .	PUBLICATION FEE	TOTAL	FEE(S) DUE	DATE DUE
	nonprovisional	YES	\$700		\$300		31000	03/23/2005
	EXAMINER		ART UNIT		CLASS-SUBCLASS			
	YEAGLEY, DANIEL S		3611		280-281100	<del></del>		
	1. Change of correspondence address or indication of "Fee Address CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Cust Number is required.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to				
	3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							
	PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
•					RESIDENCE: (CITY and STATE OR COUNTRY)			
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	Please check the appropriate assignee category or categories (will not be printed on the patent): Litaly Corporation or other private group entity Government							
					. Payment of Fee(s):			
	☑ Issue Fee			A check in the amount of the fee(s) is enclosed.				
	A Publication Fee (No small entity discount permitted)			R B.				
	Advance Order - # of Copies 10			The Director is hereby authorized by charge the equired foc(s), or credit any overpayment, to Deposit Account Number				
	5. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).							
	The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.							
	Authorized Signature	Jeph B	do	_	Date _	2/1/2005		
	Typed or printed name _	Stephen B. Sch	ett		Regist	ration No5	1,294	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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PTO/SB/17 (12-04)

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Fees pursuant to the sonsolidated Appropriations Act, 2005 (H.R. 4818).

## FEE TRANSMITTAL For FY 2005

X	Applicant claims small entity status.	See 37	CFR 1.27
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TOTAL AMOUNT OF PAYMENT (\$) 1,030.00

Complete if Known					
Application Number	10/736,325				
Filing Date	December 15, 2003				
First Named Inventor	Mario Meggiolan				
Examiner Name	Daniel S. Yeagley				
Art Unit	3611				
Attorney Docket No.	CAM3-PT032.1				

METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order None Other (please identify):  Deposit Account Deposit Account Number: 22-0493  Deposit Account Name: Volpe and Koenig, P.C.							
For the above-ide	ntified deposit a	ccount, the Dire	ctor is hereb	v authorized to	o: (check all that	apply)	
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		s) or underpaym	ents of fee(s	) X Credi	it any overpaym	ents	
under 37 C WARNING: Information on t	FR 1.16 and 1.		lit card inform	نيت nation should r	not be included o	n this form Provid	de credit card
information and authorization		, and public. Of Co	in cara imon	nation silvaia i			ac cream cara
FEE CALCULATION		•					
1. BASIC FILING, SEA	ARCH, AND E	XAMINATION	FEES				
•	FILING F	EES	SEARC		EXAMINAT		
Application Type	<u>S</u> <u>Fee (\$)</u>	mall Entity Fee (\$)	Fee (\$)	Small Entity		nall Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	500	Fee (\$) 250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	• •	160		
				150		80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES  Small Entity Fee Description Fee (\$) Fee (\$)							
Fee Description Each claim over 20 or,	for Reissues	each claim ove	er 20 and m	ore than in t	he original na	tent	Fee (\$) Fee (\$) 50 25
Each independent clain							
Multiple dependent cla			г				360 180
Total Claims	Extra Claims	Fee (\$)	Fee Pai	d (\$)	Multiple Dep	endent Claims	
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HP = highest number of ind	ependent claims p	_ ``					
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity)							
for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)  100 = / 50 = (round up to a whole number) x = 0.00							
4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)							
Other: 13308 Fee	and rubilcal	lon ree and	10 3011 00	phies			1,030.00
SUBMITTED BY							
Signature			Re	gistration No.	51 294	Telephone 2	215-568-6400

SUBMITTED BY							
Signature	tesh B. Solver	Registration No. 51,294 (Attorney/Agent)	Telephone 215-568-6400				
Name (Print/Type)	Stephen B. Schott		Date 2/18/2005				

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.